

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION	Attorney Docket Number	3/334PCT	
	First Named Inventor	H.H Weil	
	COMPLETE IF KNOWN		
	Application Number	08/990,252	
	Filing Date	December 15, 1997	
	Group Art Unit		
<input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

NEW PROPELLANT GAS MIXTURES AND THEIR USE IN PHARMACEUTICAL PREPARATIONS

the specification of which

☐ is attached hereto

or

☒ was filed on **December 15, 1997** as United States Application Number or PCT International Application Number **08/990,252**

and was amended on (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code § 119 (a)-(d) or § 365(b) of any foreign application(s) or inventors certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
PCT/EP 91/00178 P4003270.1	EPO DE	31/Jan./1991 03/Feb/1990	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto.

I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

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DECLARATION

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §356(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. PARENT APPLICATION NUMBER	PCT PARENT NUMBER	PARENT FILING DATE	PARENT PATENT NUMBER (if applicable)
08/597,230 08/282,402 07/910,353		Feb. 6, 1996 July 28, 1994 Oct. 1, 1992	

☐ Additional U.S. or PCT International application numbers are listed on a supplemental sheet attached hereto.
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

NAME	REGISTRATION NUMBER	NAME	REGISTRATION NUMBER
Robert P. Raymond Mary-Ellen M. Devlin	25,089 27,928	Alan R. Stempel	28,991

☐ Additional registered practitioner(s) are listed on a supplemental sheet attached hereto.
Direct all correspondence to:

Name	Robert P. Raymond						
Address	Boehringer Ingelheim Corporation						
Address	900 Ridgebury Road, P.O. Box 368						
City	Ridgefield	State	Connecticut	Zip	06877		
Country	USA	Telephone	203-798-9988	Fax	203-791-6183		

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name	Hans-Hermann	Middle Initial		Family Name	Weil	Suffix e.g. Jr.	
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Inventor's Signature	<i>Hans-Hermann Weil</i>				Date	1998-02-25	
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Residence: City	Gau-Bickelheim	State		Country	DE	Citizenship	DE
Post Office Address	Am Roemer 2						
Post Office Address	D-55599 Gau-Bickelheim						
City	Gau-Bickelheim	State		Zip		Country	DE

☒ Additional inventors are being listed on a supplemental sheet(s) attached hereto.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
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Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name	Ottfried	Middle Initial		Family Name	Daab	Suffix e.g. Jr.			
Inventor's Signature	<i>Dr. Ottfried Daab</i>				Date	1998-02-27			
Residence: City	Ingelheim	State		Country	DE	Citizenship	DE		
Post Office Address	Schillerstrasse 2a								
Post Office Address	D-55218 Ingelheim								
City	Ingelheim	State		Zip		Country	DE		
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City		State		Country		Citizenship			
Post Office Address									
Post Office Address									
City		State		Zip		Country			
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City		State		Country		Citizenship			
Post Office Address									
Post Office Address									
City		State		Zip		Country			
Name of Additional Joint Inventor, if any:								<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Middle Initial		Family Name		Suffix e.g. Jr.			
Inventor's Signature					Date				
Residence: City		State		Country		Citizenship			
Post Office Address									
Post Office Address									
City		State		Zip		Country			

☐ Additional inventors are being listed on a supplemental sheet(s) attached hereto.

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